

## 03-07-07

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PTO/SB/31 (07-06)

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NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional)		
		082871-000520US		
Express Mail Label No. EV 656 877 135 US	In re Application of			
	Application Nu	Application Number 10/756,849 Filed January 13, 2004		
	For DISPOSABLE FEMININE HYGIENE PRODUCTS HAVAING COPPER COMPUNDS FOR COMBATING YESAT INFECTION (AS AMENDED)			
	Art Unit 376	1	Examiner Michael G. Bogart	
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.				
The fee for this Notice of Appeal is (37 CFR 41.20(b)(1))	•		\$ _500	
Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:				
A check in the amount of the fee is enclosed.				
Payment by credit card. Form PTO-2038 is attached.				
The Director has already been authorized to charge fees in this application to a Deposit Account.  I have enclosed a duplicate copy of this sheet.				
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>20-1430</u> . I have enclosed a duplicate copy of this sheet.				
A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.				
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.				
I am the	a	1		
applicant/inventor.				
assignee of record of the entire interest.		Pandalah T. Anala		
See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclose (Form PTO/SB/96)	d. ———		Typed or printed name	
attorney or agent of record.	650-326-2400			
Vediangnou nouncei			one number	
attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. 36,429	March 5, 2007  Date			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.  Submit multiple forms if more than one signature is required, see below*.				

★ \*Total of \_\_1 form is submitted in duplicate.

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